

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) 2007 OC -8 AM 11: 50

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Yes No		2		
COMMITTEE INFORMATION		ha manage	de la laction de la constant de la c	
1. Full Name of Committee (as on Statement of Organization) Check if this is a new real Committee Committee				
Acronym or Abbreviated Name (if any)	3. Committee Telephone Number			
	(317)844-3036			
4. Mailing Address (address where all campaign finance correspondence is received)	heck if this is a	new address		
5. City, State, ZIP Code	6. Party Affiliation (if applicable)			
INDIANAPOLIS, IN 46280		BLICAN		
CANDIDATE INFORMATION (For Candidate's C	ommittees O	lnly)		
7. Full Name of Candidate (include any nickname)	8. Party Affiliation or If Independent Candidate			
Douglas Callahan	Republica			
Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence			
	14	AMILTON		
TYPE OF REPORT	Contract of the Contract of th		N CANDIDATES ONLY	
11. Check one:		Check one:		
Pre-Primary Pre-Election Annual Nomination Other Pre-Convention Final/Disbands Committee (lines 18. 19. and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement of Organization) Post-Convention				
	Organization)	L Post-con	vendon	
12. Reporting Period: From: \ - \ - \ - \ - \ \ Through: \ \ - \ \ - \ \ \ \ \ \ \ \ \ \ \ \ \		COLUMN A This Period	COLUMN B Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.		181.66		
14. Cash on hand and investments January 1, current year.	100	781.	- 181.66	
CONTRIBUTIONS AND RECEIPTS			Management of the second	
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (use Schedule A)		181.66	1/81.66	
15b. Uniternized				
15c. Add lines 15a and 15b in both columns SUBT	OTAL #	181.66	6/81.66	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	OTAL	0	0	
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (use Schedule B) (Public Question: use Schedule C)				
17b. Unitemized				
17c. Add lines 17a and 17b in both columns SUB	TOTAL			
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	0	0	
19. Debts OWED BY the committee (use Schedule D)				
20. Debts OWED TO the committee (use Schedule E)		0		

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE

Signature on File

Date

oled for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly

A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER				
Page	of			

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 DOUGLAS CALLAHAN 1015 EAST 106 TH ST. INDPU, IN 46280	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)	181.66	181.66	1-4-07
Contributor's Occupation (if required)	Contributions			
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)	Contributions:			
	Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
SUBTOTAL TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A	\$		
	M 15a of the Summary Sheet)	s		

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